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10/02/01

# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	Proflowers-P2-01
First Inventor	Jared P. Schutz
Title	Generating a Courier Label...Print
Express Mail Label No.	ET293076945US

09/847644  
10/02/01

APPLICATION ELEMENTS		ADDRESS TO:	
See MPEP chapter 600 concerning utility patent application contents.			
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i>		Assistant Commissioner for Patents Box Patent Application Washington, DC 20231	
2. <input checked="" type="checkbox"/> Applicant claims small entity status. <i>See 37 CFR 1.27.</i>			
3. <input checked="" type="checkbox"/> Specification [Total Pages <b>117</b> ] <i>(preferred arrangement set forth below)</i> <ul style="list-style-type: none"> <li>- Descriptive title of the invention</li> <li>- Cross Reference to Related Applications</li> <li>- Statement Regarding Fed sponsored R &amp; D</li> <li>- Reference to sequence listing, a table, or a computer program listing appendix</li> <li>- Background of the Invention</li> <li>- Brief Summary of the Invention</li> <li>- Brief Description of the Drawings <i>(if filed)</i></li> <li>- Detailed Description</li> <li>- Claim(s)</li> <li>- Abstract of the Disclosure</li> </ul>		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program <i>(Appendix)</i> 8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> <ul style="list-style-type: none"> <li>a. <input type="checkbox"/> Computer Readable Form (CRF)</li> <li>b. Specification Sequence Listing on:           <ul style="list-style-type: none"> <li>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</li> <li>ii. <input type="checkbox"/> paper</li> </ul> </li> <li>c. <input type="checkbox"/> Statements verifying identity of above copies</li> </ul>	
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [ Total Sheets <b>43</b> ]		9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))	
5. Oath or Declaration [ Total Pages <b>      </b> ]		10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of <i>(when there is an assignee)</i> <input type="checkbox"/> Attorney	
a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) <i>(for continuation/divisional with Box 18 completed)</i>		11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i>	
i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> <i>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</i>		12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations	
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		13. <input type="checkbox"/> Preliminary Amendment	
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:		14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i>	
<input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) <i>Prior application information:</i> Examiner <b>Akers, G.</b>		15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i>	
<b>For CONTINUATION OR DIVISIONAL APPS only:</b> The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.		16. <input type="checkbox"/> Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.	
		17. <input type="checkbox"/> Other: _____	

19. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label		or <input checked="" type="checkbox"/> Correspondence address below	
Name	Peter K. Trzyna		
Address	P.O. Box 7131		
City	Chicago	State	Illinois
Country	USA	Telephone	3122400824
Name (Print/Type)	Peter K. Trzyna		Registration No. (Attorney/Agent) <b>32,601</b>
Signature			Date <b>May 2, 2001</b>

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

# FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 523.00)

## Complete if Known

Application Number	
Filing Date	
First Named Inventor	Jared Schutz
Examiner Name	
Group Art Unit	
Attorney Docket No.	Proflowers-P2-01

## METHOD OF PAYMENT

1.  The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number	50-0235
Deposit Account Name	Peter K. Trzyna

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

Applicant claims small entity status. See 37 CFR 1.27

2.  Payment Enclosed:

Check  Credit card  Money Order  Other

## FEE CALCULATION (continued)

## 3. ADDITIONAL FEES

Fee Code	Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65 Surcharge - late filing fee or oath	65.00
127	50	227	25 Surcharge - late provisional filing fee or cover sheet	
139	130	139	130 Non-English specification	
147	2,520	147	2,520 For filing a request for <i>ex parte</i> reexamination	
112	920*	112	920* Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840* Requesting publication of SIR after Examiner action	
115	110	215	55 Extension for reply within first month	
116	390	216	195 Extension for reply within second month	
117	890	217	445 Extension for reply within third month	
118	1,390	218	695 Extension for reply within fourth month	
128	1,890	228	945 Extension for reply within fifth month	
119	310	219	155 Notice of Appeal	
120	310	220	155 Filing a brief in support of an appeal	
121	270	221	135 Request for oral hearing	
138	1,510	138	1,510 Petition to institute a public use proceeding	
140	110	240	55 Petition to revive - unavoidable	
141	1,240	241	620 Petition to revive - unintentional	
142	1,240	242	620 Utility issue fee (or reissue)	
143	440	243	220 Design issue fee	
144	600	244	300 Plant issue fee	
122	130	122	130 Petitions to the Commissioner	
123	50	123	50 Processing fee under 37 CFR 1.17(q)	
126	180	126	180 Submission of Information Disclosure Stmt	
581	40	581	40 Recording each patent assignment per property (times number of properties)	
146	710	246	355 Filing a submission after final rejection (37 CFR § 1.129(a))	
149	710	249	355 For each additional invention to be examined (37 CFR § 1.129(b))	
179	710	279	355 Request for Continued Examination (RCE)	
169	900	169	900 Request for expedited examination of a design application	
Other fee (specify) _____				
*Reduced by Basic Filing Fee Paid				SUBTOTAL (3) (\$ 65.00)

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
101	710	201	355 Utility filing fee
106	320	206	160 Design filing fee
107	490	207	245 Plant filing fee
108	710	208	355 Reissue filing fee
114	150	214	75 Provisional filing fee
SUBTOTAL (1) (\$ 355.00)			

## 2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
27	-20** = 7	x 9	= 63.00
Independent Claims	4	- 3** = 1	x 40 = 40
Multiple Dependent			=

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	
103	18	203	9 Claims in excess of 20
102	80	202	40 Independent claims in excess of 3
104	270	204	135 Multiple dependent claim, if not paid
109	80	209	40 ** Reissue independent claims over original patent
110	18	210	9 ** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2) (\$ 103.00)			

\*\*or number previously paid, if greater; For Reissues, see above

SUBMITTED BY

Name (Print/Type)	Peter K. Trzyna	Registration No. (Attorney/Agent)	32,601	Complete (if applicable)
Signature			Date	May 2, 2001

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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